

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	✓	01/01/01	
O.I.P.E. CLASSIFIER	✓		
FORMALITY REVIEW	AB	JC900	10/22/01
RESPONSE FORMALITY REVIEW	ET		01-02-02

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral)... Canceled A ..... Appeal  
 + ..... Restricted O ..... Objected

Claim	Date
Final	
Original	2
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

947  
01/02/02

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